Phone: +91-11-4967 4967

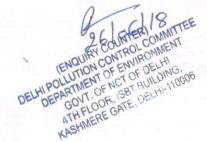


## Human Care Medical Charitable Trust

Registered Office: Sector-6, Dwarka (Near Telephone Exchange), New Delhi - 110 078
Email: humancarehospital@gmail.com | Website: www.hcmct.com

7587

Sr. Environmental Engineer
Delhi Pollution Control Committee
6th floor, ISBT building
Kashmere Gate
New Delhi-110006



Kind Attention: Mr. Pankaj

Subject: Annual return for health care facility for the year 2018

Sir

Please find the enclosed annual return for the year 2018 of bio-medical waste generation with FORM-IV duly filled as desired by you for our HCF.

We assure you that we shall comply with all directions and regulation to operate the bio-medical waste management rule, guideline as advised by DPCC authorities from time to time.

We shall be greatful to submit future information.

Thanking You

Yours truly

For: Human Care Medical Charitable Trust

Authorised Signatory

Encl. As Above:

1. Form-IV duly filled and submitted

## Form - IV (See rule 13) ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

| S.No | Particulars  |  |
|------|--|--|
|      | Particulars of the Occupier:   | HUMAN CARE MEDICAL CHARITABLE TRUST                            |
|      | (i) Name of the authorised person<br>(occupier or<br>operator of facility)               | SANJAY KHURANA   |
|      | (ii) Name of HCF or CBMWTF:  | SMS WATER GRACE BMW PVT LTD                                    |
|      | (iii) Address for Correspondence:  | ADJOINING MTNL BUILDING, SECTOR-6,<br>DWARKA, NEW DELHI-110075 |
|      | (iv) Address of Facility   | ADJOINING MTNL BUILDING, SECTOR-6,<br>DWARKA, NEW DELHI-110075 |
|      | (v)Tel. No, Fax. No:   | 9899356373   |
|      | (vi) E-mail ID :   | sanjay3591@aol.com   |
| /    | (vii) URL of Website   |  |
|      | (viii) GPS coordinates of HCF or CBMWTF  | 28° 35' 31.7040'' N & 77° 2' 45.7836'' E                       |
|      | (ix) Ownership of HCF or CBMWTF  | Private  |
|      | (x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules | Authorised and valid upto 29.10.2022                           |
|      | (xi). Status of Consents under Water Act and Air Act                                     | Approved on 14.03.2018 and valid upto 29.10.2022               |
| 2    | Type of Health Care Facility   |  |
|      | (i) Bedded Hospital  | 380 (FUNCTIONAL -101)  |
|      | (ii) Non-bedded hospital<br>(Clinic or Blood Bank or Clinical<br>Laboratory or           |  |

|     | nnum  | SMS WATER GRACE BMW PVT LTD         |
|-----|---|-------------------------------------|
| . 1 | vi) Name of the Common Bio-<br>Medical Waste Treatment Facility<br>Operator through which wastes are<br>disposed of   | SIVIS WATER GROSS                   |
|     | (vii) List of member HCF not handed over bio-medical waste.   | N/A                                 |
|     | Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period   | No                                  |
| ,   | Details trainings conducted on BMW  (i) Number of trainings conducted on BMW Management.  | 33                                  |
|     | (ii) number of personnel trained (iii) number of personnel trained at the time of induction   | 364 (including repetition of staff) |
|     | (v) whether standard manual for training is available?  | YES, PPT BASED                      |
| 8   | Details of the accident occurred during the year  (i) Number of Accidents occurred  (ii) Number of the persons affected  (iii) Remedial Action taken (Please attach details if any)  (iv) Any Fatality occurred, details. | No                                  |
| 9   | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?  Details of Continuous online emission monitoring systems installed                         | N/A                                 |
| 10  | Liquid waste generated and treatment<br>methods in place. How many times<br>you have not met the standards in a<br>year?  |                                     |
| 11  | mothod or   | N/A                                 |